



PART B - FEE(S) TRANSMITTAL

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P.O. Box 1450
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29085 7590 02/26/2009

HOWARD EISENBERG, ESQ.
 1220 LIMBERLOST LANE
 GLADWYNE, PA 19035
 03/16/2009 WASFAW2 00000019 09614790

01 FC:2501 755.00 OP
 02 FC:8001 15.00 OP

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HOWARD EISENBERG (Depositor's name)
 [Signature] (Signature)
 MARCH 14, 2009 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/614.790	07/12/2000	Sharon F. Kleyn	HME/7982.001	2570

TITLE OF INVENTION: METHOD AND KIT FOR MOISTURIZING THE SURFACE OF THE EYE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$755	\$0	\$0	\$755	05/26/2009
EXAMINER	ART UNIT	CLASS-SUBCLASS				
WANG, SHENGJUN	1617	424-401000				

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list
 (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
 1. HOWARD EISENBERG, ESQ.
 2. _____
 3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

ROGUE VALLEY NATURAL SPRINGS, INC.

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

GRANTS PASS, OREGON

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

☒ Issue Fee
☐ Publication Fee (No small entity discount permitted)
☒ Advance Order - # of Copies 5

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☐ A check is enclosed.
☒ Payment by credit card. Form PTO-2038 is attached.
☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-1773 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

[Signature]

Date MARCH 14, 2009

Typed or printed name

HOWARD EISENBERG

Registration No. 36,789

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**Howard Eisenberg, Esq.**

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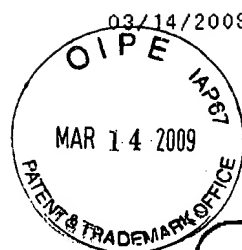
FAX COVER SHEET

FAX NUMBER TRANSMITTED TO: (571) 273-2885

To: US Patent and Trademark Office
Office: Office of Patent Publication
Serial No.: 09/614,790
First Inventor: Sharon F. Kleyne
Title: METHOD AND KIT FOR MOISTURIZING THE SURFACE OF THE EYE
Filed: July 12, 2000
From: Howard Eisenberg
Atty Docket No.: HME/7982.001
Date: March 14, 2009

DOCUMENTS	NUMBER OF PAGES*
PTOL-85 - Issue Fee Transmittal Form	One
Transmittal Form	One
Credit Card Payment Form	One
TOTAL PAGES (not counting cover sheet)	Three

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PTO/SB/21 (02-09)

Approved for use through 03/31/2009. OMB 0651-0031

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/814,790	
	Filing Date	July 12, 2000	
	First Named Inventor	Sharon F. Kleyne	
	Art Unit	1617	
	Examiner Name	Wang, Shengjun	
Total Number of Pages In This Submission	3	Attorney Docket Number	HME/7982.001

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks Fee Transmittal Form (PTOL-65)		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Howard Eisenberg, Esq.		
Signature			
Printed name	Howard Eisenberg		
Date	March 14, 2009	Reg. No.	36,789

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Signature	
Typed or printed name	Howard Eisenberg
Date	March 14, 2009

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